

<b>Vision Direct</b> Portfolio View						
Current Portfolio: <u>All Accounts</u>						
Fund Name	Account Number	Current Price	Today's Change	% Change	# Shares	Market Value
<b>Berger Funds</b>						
Next Gen Fund	543214444	\$23.20*	+0.60	+0.40%	643.987	\$14,940.50
<b>Janus Funds</b>						
Janus Fund	500321896	\$30.00	+0.80	+1.68%	15.1230	\$453.69
Mercury Fund	123456789	\$31.00	+1.44	+2.42%	24.0000	\$744.00
Mercury Fund	123456790	\$31.00	+1.44	+2.42%	25.0000	\$775.00
Tech. Fund	555121211	\$35.00*	+2.50	+3.21%	10.1000	\$353.50
<b>Total Portfolio value:</b>						\$17,266.19
Portfolio holdings as of : <u>12/01/1999</u> .						
Prices marked with a * are as of the previous business day.						
View Portfolio History Setup New Portfolio Change Portfolio						
Select an account number to view details of that account Select a fund name to view fund information Select a fund family name to visit the fund family's web site						

**Figure 4**

<b>Vision Mutual Fund Gateway</b> <b>Monthly Billing Summary Report</b>				500
Report Number: R07960 Source program: B10108 Job: MFJM426B System: DFE Corp Billing ID Management Code: BU Billing Period: 11/1/99-11/30/1999				502
Billable inquiry Views:	325	View Charges	\$ 16.25	504
Billable Vision ID's:	80	Vision ID Charges	\$ 400.00	506
Billable Purchases	100	Purchases	\$50.00	
Billable Redemptions	35	Redemptions	\$17.50	
Billable Exchanges	30	Exchanges	\$15.00	
Billable New Accounts	50	New Accounts	\$25	
Total			\$523.75	

**Figure 5**

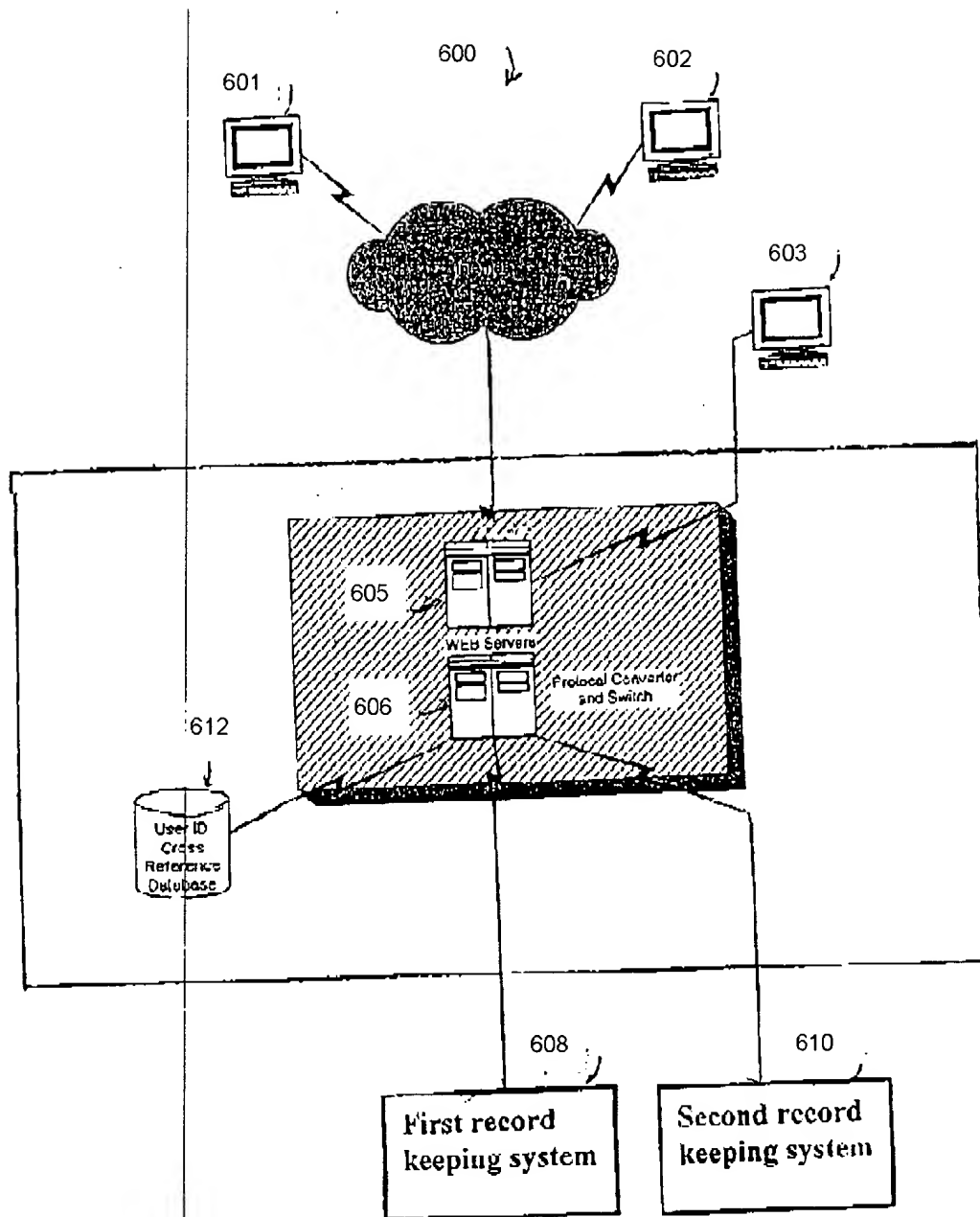


FIGURE 6

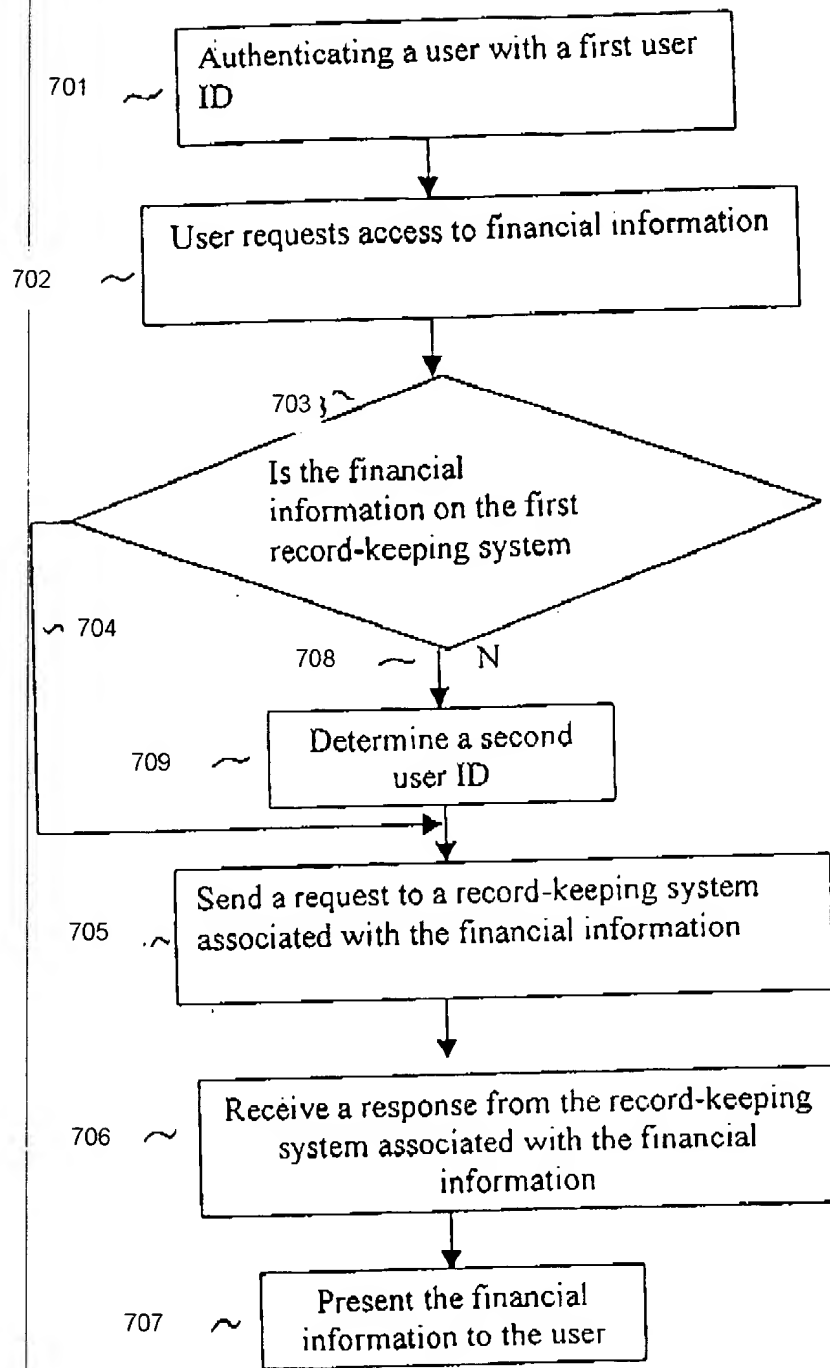
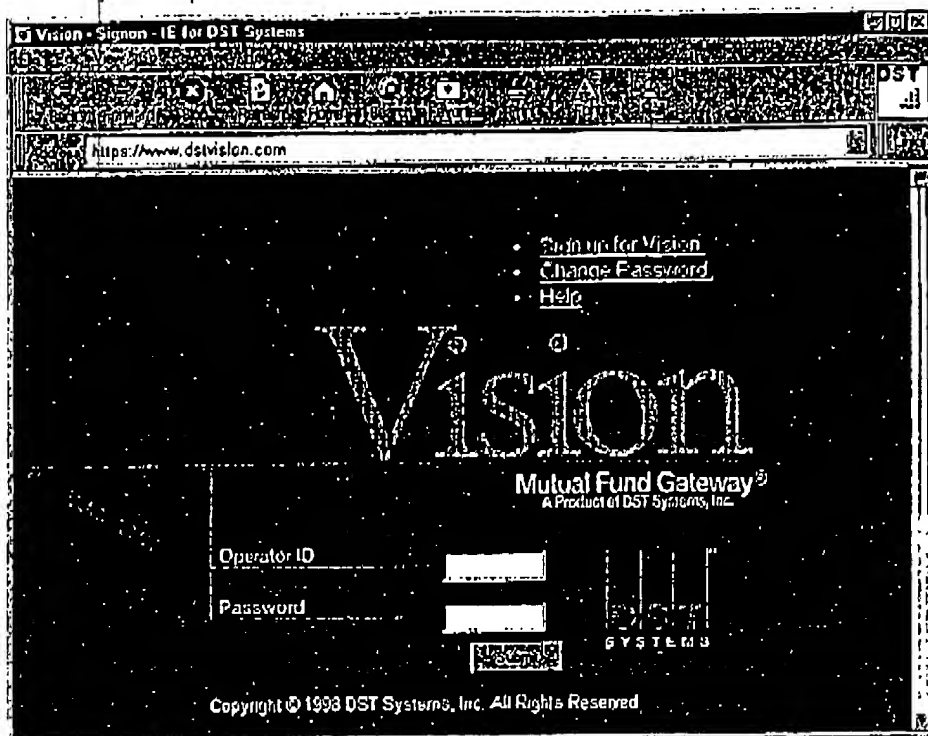
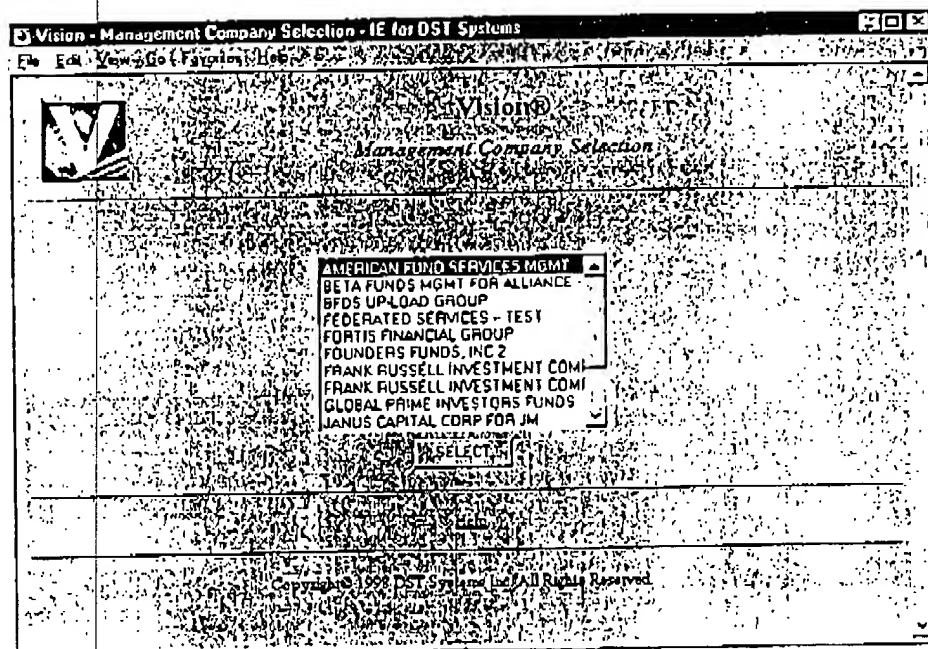


FIGURE 7



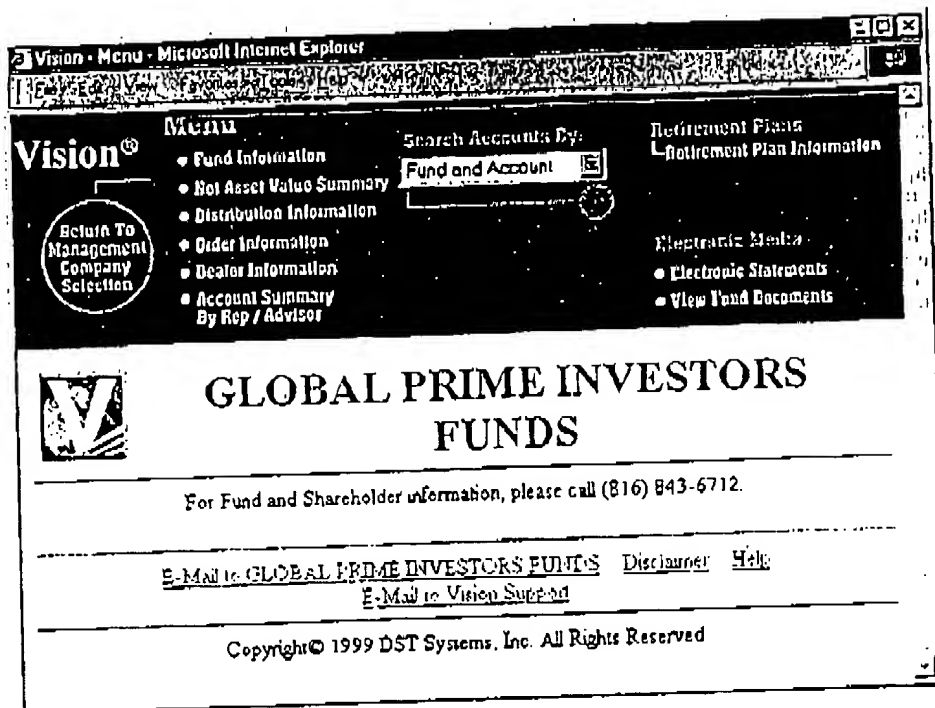
Sign on window

FIGURE 8(a)



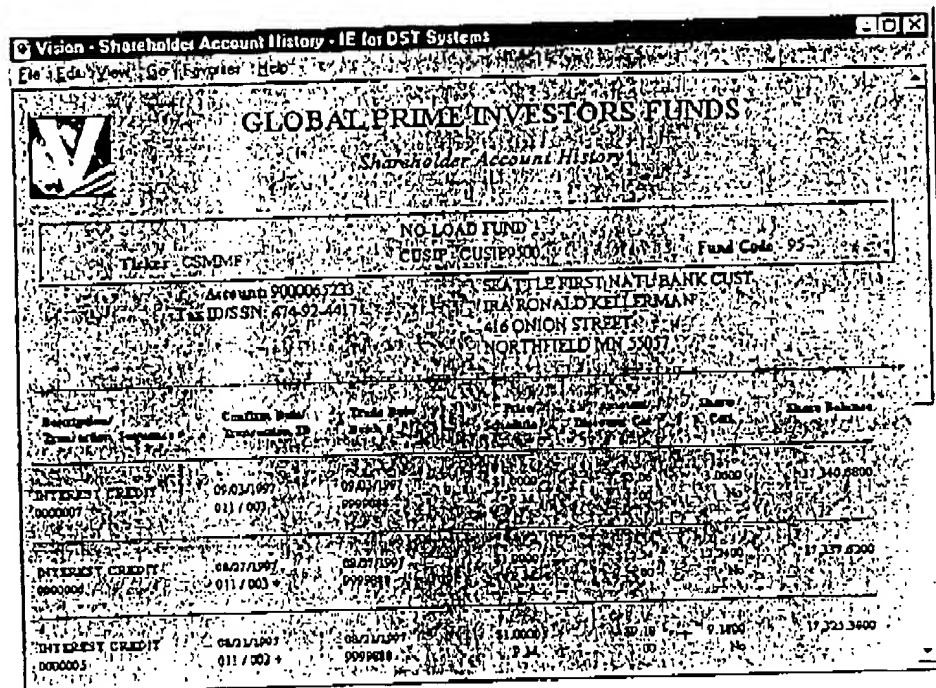
Management Company Selection window

FIGURE 8(b)



Vision Menu window

FIGURE 8(c)



Shareholder Account History window

FIGURE 8(d)

901

902

903

904

905

906

Columns	Field Name	Field Type	M/O	Values	Description
1-4	Project ID	Alpha 4	M		Project identifier used to identify the layout. Assigned by DST.
5-7	Header Version	Num 3		Send spaces or null values	Version of Header. For future use.
8-17	Packet Length	Num 10	M		Total length of data stream including the header
18-20	Data Version	Num 3		Send spaces or null values	Version of the Data. For future use.
21-30	Data Length	Num 10	M		Length of data area, not including header (0 if no data).
31-47	Transaction ID	Alpha 17	M		Transaction identifier. For example, ACCTHIST@VISION. This format is <i>not</i> required. If an alternate transaction ID format is preferred, the new name and format is required for each type of transaction. The field type/length remains the same.
48-57	Source System ID	Alpha 10		Send spaces	Indicates the source of the message. This value is used for information purposes. DST will assign these values to the message originators. For future use.
58-67	Source Tag	Num 10	M	Operator defined	This field can be used by the source application to attach an "identification" tag to individual transactions. This value will be returned in the response header.
68-77	Operator ID	Alpha 10	M	Vision or External Fund ID	The Operator ID (Vision) used to log on.
78-85	Password	Alpha 8	M	Send spaces	
86-89	Return Code	Num 4	M	0000-Normal 0010-Error	Return Code.
90-97	Error Code	Alpha 8	O		Error Code from the target system. This could be used as a reference if the Vision operator should call the fund.
98-337	Error Data	Alpha 240		Send spaces	DST use only.

FIGURE 9

# Error Messages

1000

1001

1002

1003

1004

Error Code	Error Message	Description
ACTF0001	The request failed because the Host System has detected a problem. Please call the Vision Help line at 800-435-4112 and report the error code below for assistance.	Severe system error has occurred.
ACTF0002	The system is currently performing updates as a result of today's business. The information you have attempted to retrieve is temporarily unavailable. Please try again later. We apologize for the inconvenience. Please click the Back button on your browser to return to the previous page.	Files unavailable for read access due to system updates or file outages.
ACTF0003	The request failed because your Operator ID is not authorized to perform this function. Please call the Vision Help line at 800-435-4112 for assistance.	Operator ID not authorized.
ACTF0013	The fund is currently unable to process this request within the allotted time.	The fund is unable to process the request, either because of network overload or because the request cannot be processed within the allotted time.

FIGURE 10

1100

# Transaction Fixed Request Data

1101

1102

1103

Columns	Field Name	Field Type	M/O	Values	Description
1-13	Security Issue ID	Alpha 13	M		Identifies the mutual fund. This field contains a two-character country code (00), a nine-character CUSIP, a one-character check digit (0), and a one-character test code (P).
14-33	Account Number	Alpha 20	M		The unique identifier for a shareowner account within a mutual fund.
34-58	Index	Alpha 25	M		Index to request additional accounts when list is longer than a single request.

FIGURE 11



## Transaction Variable Repeatable Response Data

Columns	Field Name	Field Type	M/O	Values	Description
1-7	Key Suffix	Num 7	O		Transaction sequence number in the history.
8-13	Transaction Identifier	Alpha 6	O		Indicates the type of transaction. Formatted as xxx/xxx (the '/' is hard coded after the third character).
14-28	Shares	Num 15	M	11.4	Number of shares involved in the transaction.
29-43	Gross Amount	Num 15	M	13.2	Dollar amount of the transaction.
44-58	Running Balance	Num 15	M	11.4	Cumulative share balance of account.
59-68	Confirmation Date	Char 10	M	MM/DD/YYYY	Date transaction was processed.
69-78	Trade Date	Char 10	M	MM/DD/YYYY	Date transaction was priced.
79-87	Price	Num 9	M	5.4	Price used for the transaction.
88-94	Batch Number	Num 7	O		Transaction processing group number.
95	Pre/Post Noon	Alpha 1	O	B=Before Noon A=After Noon	Determines if the transaction occurred before noon or after noon.
96-97	Discount Category	Num 2	O		Code indicating the price break a shareholder will receive on new shares purchased.
98	Certificate Issue Code	Alpha 1	O	Y/N	Indicates certificate was issued on a purchase transaction.
99-128	Transaction Description	Alpha 30	M		The alpha description of the transaction.

FIGURE 12

1300

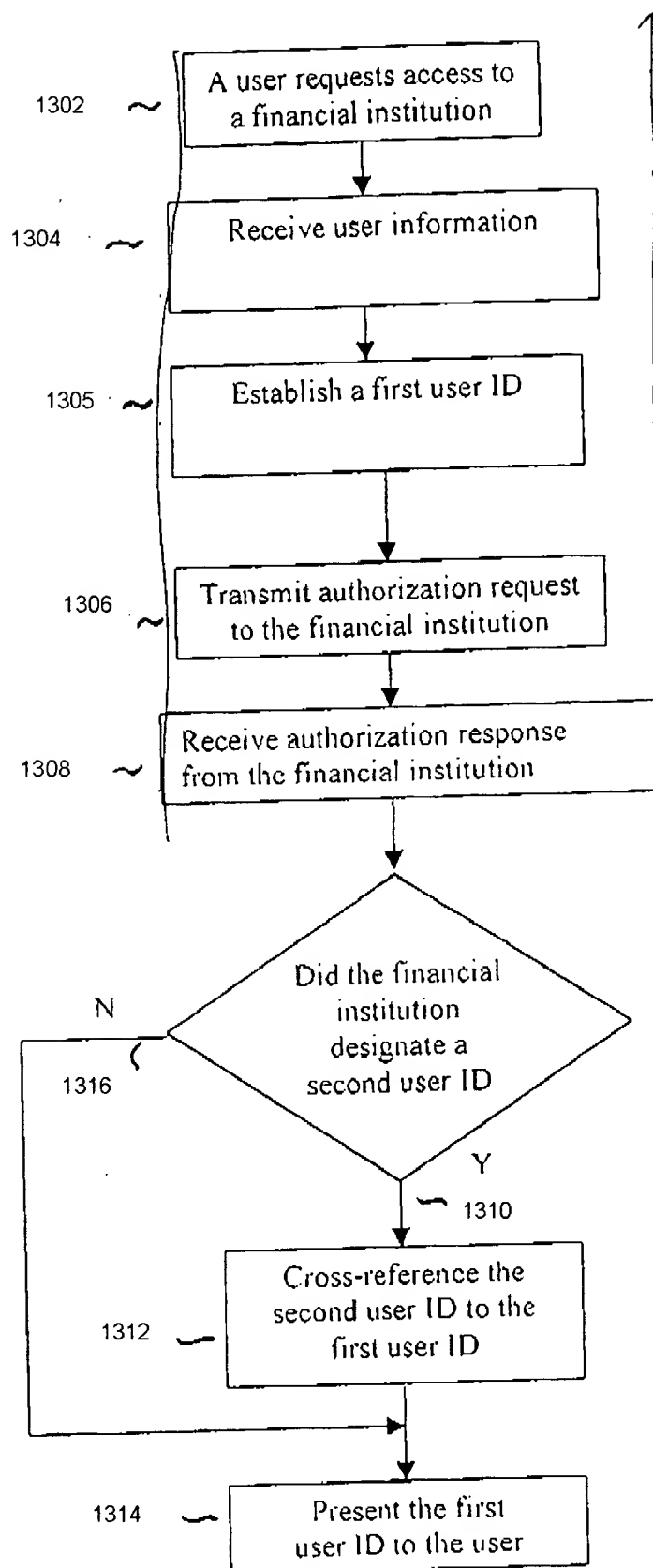


FIGURE 13

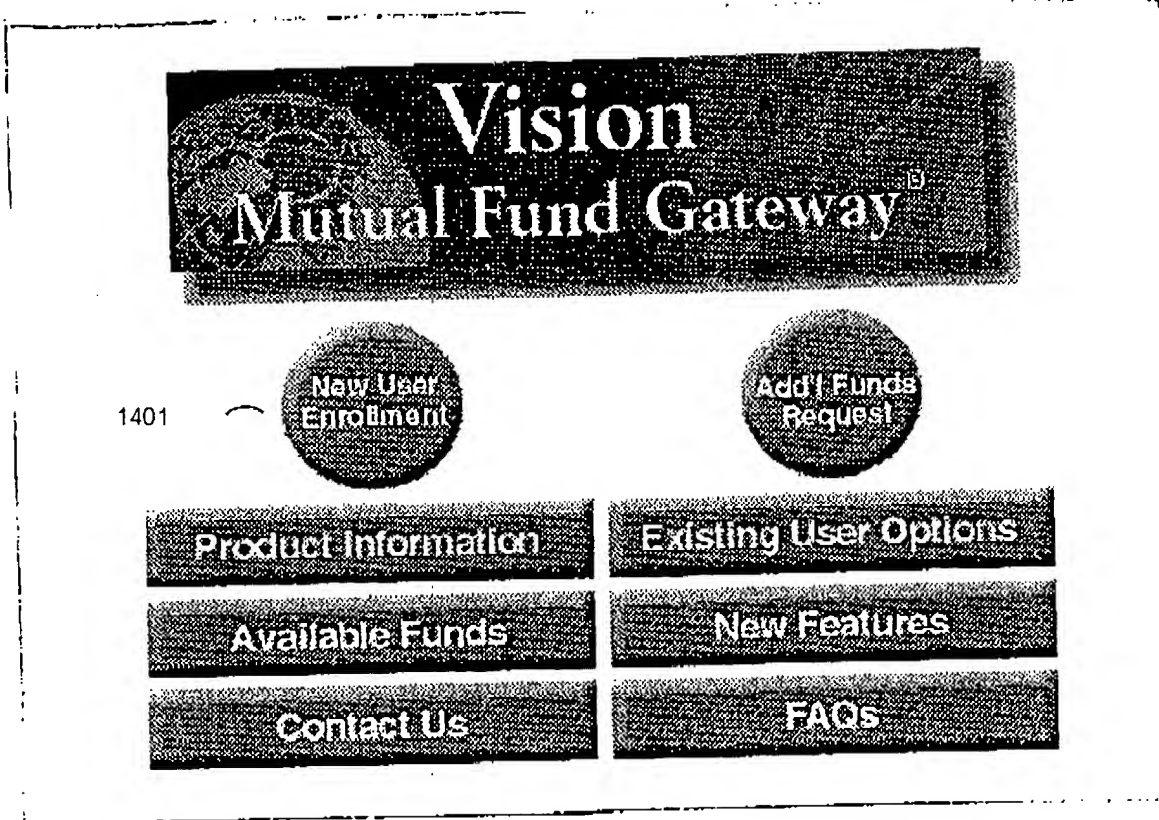


FIGURE 14(a)

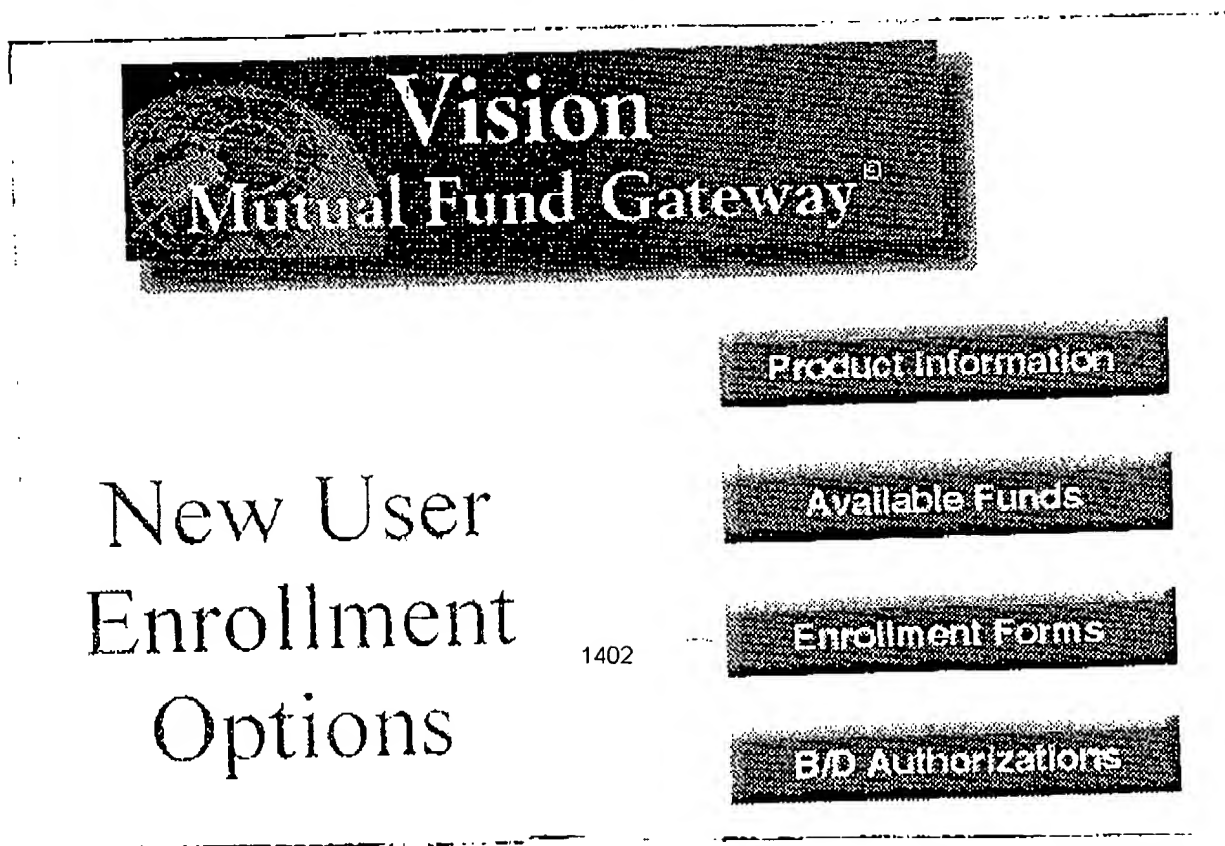


FIGURE 14(b)



## Enrollment Form

*Select the level at which you will access Vision.*





- |      |   |  |
|------|---|--|
| 1403 |   | Provides access to all accounts assigned to your broker/dealer firm.   |
| 1404 |  | Provides access to all accounts assigned to your branch office.  |
| 1405 |  | Provides access to your individual accounts in which you are the representative or advisor of record. Each representative must complete his or her own enrollment.   |
| 1406 |  | Provides access to accounts grouped under a single tax identification number. Tax ID access may be appropriate for trust companies and banking institutions. Tax ID access is not available at the shareowner Social Security level. |

FIGURE 14(c)



## Enrollment Form Dealer Access

This enrollment form provides access to all accounts assigned to your Broker/Dealer firm. If you are in the incorrect form, please click "Cancel & Close Window". If this is the correct form for the access you require, please scroll down to complete. Fields marked in bold are required.

**Cancel & Close Window**

Broker/Dealer Name:

Contact Person:

Last:

First:

Contact's E-Mail Address:

*Correspondence regarding Vision access is communicated by e-mail; without a valid e-mail address, some communication may be delayed.*

Mailing Address:

City:

State or Province:

ZIP Code:

 - 

Country:

 **United States**

Phone Number:

 (  )  -  ext. 

Fax Number:

 (  )  - 

Number of Required  
Vision IDs:

 1

**Continue** **Reset**

**Cancel Enrollment**

FIGURE 14(d)



## Enrollment Form Branch Access

This enrollment form provides access to all accounts assigned to your branch office. If you are in the incorrect form, please click "Cancel & Close Window". If this is the correct form for the access you require, please scroll down to complete. Fields marked in bold are required.

**Cancel & Close Window**

Broker/Dealer Name:

Firm Name:

Contact Person:

Last:

First:

Contact's E-Mail Address:

*Correspondence regarding Vision access is communicated by e-mail; without a valid e-mail address, some communication may be delayed.*

Mailing Address:

City:

State or Province:

ZIP Code:

Country:

Phone Number:

-  ext.

Fax Number:

-

Number of Required Vision IDs:

**Continue** **Reset**

**Cancel Enrollment**

FIGURE 14(e)



## Enrollment Form Representative Access

This enrollment form provides access to your individual accounts in which you are the representative or advisor of record. Each representative must complete his or her own enrollment. If you are in the incorrect form, please click "Cancel & Close Window". If this is the correct form for the access you require, please scroll down to complete. Fields marked in bold are required.

**Cancel & Close Window**

Fields marked in bold are required. Correct completion of this form is essential to processing your enrollment. An incomplete form will be returned to you and your enrollment will not be processed until the correct information is submitted.

(If you are not affiliated with a Broker/Dealer, type FEE ADVISOR in this field.)

**Broker/Dealer Name:**

**Firm Name:**

**Representative's Name:**

Last:

First:

**Contact's E-Mail Address:**

*Correspondence regarding Vision access is communicated by e-mail; without a valid e-mail address, some communication may be delayed.*

**Mailing Address:**

**City:**

**State or Province:**

**ZIP Code:**

**Country:**

United States

**Phone Number:**

ext.

FIGURE 14(f)

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